

ISDH 2003 Hospital Service Report

(Annual Report under Indiana Code 16-21-6)

Terre Haute Regional HospitalCity: Terre Haute County: Vigo Year: **2003**

Provider Type: General Acute

I. Inpatient Care				
Hospital Service Description	Number of Set Up Beds	Number of Discharges	Number of Patient Days	Average Charge Per Discharge
Burn Care	0	0	0	\$0
Cardiac Intensive	0	0	0	\$0
ICU Med/Surg	18	962	3,378	\$4,598
ICU Neonatal	0	0	0	\$0
ICU Pediatric	0	0	0	\$0
Medical/Surgical	120	4,734	24,464	\$25,493
Neonatal Intermed	0	0	0	\$0
Obstetrics	17	1,051	22,487	\$919
Pediatric	16	489	1,130	\$1,040

Psychiatric	0	0	0	\$0
Rehabilitation	16	581	4,357	\$8,387
Substance Abuse	0	0	0	\$0
Swing Beds	NA	0	0	\$0
Other Services	0	0	0	NA
Acute Subtotal	187	7,817	55,816	NA
Normal Newborn	15	784	1,743	\$1,465

II. Outpatient Visits			
Circulatory System	3,210	Digestive System	3,537
Endocrine System	2,458	Injuries and Poison	5,991
Mental Disorder	834	Musculoskeletal	4,378
Neoplasms	1,844	Nervous	2,074
Respiratory	4,274	Urinary	4,881
Other/Unknown	15,249	Total Visits	48,730
Number of Visits to Emergency Department			17,811
Percent of Emergency Department Visits of Total Visits			36.6%

Identification of Hospital Services

Each hospital has identified if it has one or more of a standard list of 41 services. This list of services is updated annually by each hospital from the information initially requested by the Centers for Medicare & Medicaid Services when the hospital was initially certified for Medicare payment.

Y - Acute Renal Dialysis	N - Alcohol/Drug Service	Y - Anesthesia Services
Y - Blood Bank	N - Burn Care Unit	N - Chiropractic Service
Y - Coronary Care Unit	N - Dental Services	Y - Dietetic Services
Y - Emergency Service	N - Home Care Program	N - Hospice
Y - Inpatient Surgical Services	Y - Intensive Care Unit	Y - Laboratory(Clinical)
Y - Laboratory(Anatomical)	N - Long Term Care Unit	Y - Neonatal Nursery
Y - Nuclear Medicine Services	Y - Obstetrics Services	
Y - Occupational Therapy	Y - Open Heart Surgery	Y - Operating Room
N - Optometric Service	Y - Organ Bank	N - Organ Transplant
Y - Outpatient Service	Y - Outpatient Surgery Unit	Y - Pediatric Services
Y - Pharmacy	Y - Physical Therapy	Y - Postoperative Recovery
Y - Psychiatric Services	Y - Radiology(Diagnostic)	Y - Radiology(Therapeutic)
Y - Rehabilitation Services	Y - Respiratory Services	N - Self Care Unit
N - Shock Trauma	Y - Social Services	Y - Speech Pathology

NA =	Not applicable	NMF =	No meaningful figure	NR =	Not reported
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